

## Letter to My Future Doctor

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*Everyone is talking. Physicians, politicians, newspaper columnists, patients, families, authors, talk show hosts, all are debating our right to decide how and when we will die. It is necessary and wise to obtain a medical directive. One question we must ask ourselves as physicians is, Can we do what we ask our patients to do? Here is one physician's medical directive.*

**W**e are in an era of ethical conundrums, especially in the distinction between what we *can* do and what we *ought* to do regarding the continuation of life. I admit that, knowing as much as I do, I fear your enthusiasms and your doubts. Because I do not know you yet, I want to take this chance to make myself clear to you.

I believe that my body is a vehicle for my brain, no more than a machine that allows my mind to function. So long as my brain works, that is, receives and sends coherent messages, I would wish to live.

If my brain fails—by trauma, a residual of metabolic disarray, degenerative process, tumor, ischemia, infection, or other chronic or acute event—let me die.

If I am in a chronic vegetative state, irreversible coma, or dementia to the point where I require help in basic functions—let me die.

It can be argued that you won't be sure of the permanence of such a state of cerebral dysfunction, but I don't require absolutes.

If in your best opinion the strong likelihood is for continued brain dysfunction—let me die.

I cannot make decisions now about dismemberment, physical limitations, chronic pain, "terminal" disease, and the like, since the circumstances of these may vary greatly. I would want to make a decision at the time, after talking with you.

If I am incapable and unlikely, because of the nature of my illness, ever to be capable of making such a decision, I will be by definition in the category of projected cerebral dysfunction already discussed—let me die.

What do I mean by "Let me die"? I mean let me die without vacillation: no antibiotics, fluids, enteral or parenteral sustenance, electrolyte manipulations, supportive machinery, or emergency interventions other than are necessary to relieve pain. Don't let your fear of the law, or the strident desires of others, override your common sense. Should someone accuse you of "playing God," tell them that I said that death is a natural end; it is the futile prolongation of severely damaged life that is "playing God." Moreover, I now also give you permission to take organs from me that might benefit others—eyes, kidneys, heart, skin, liver . . . whatever.

I was not for millions of years, the time before my birth; I will not be for all of subsequent time beyond my death; the one is no different to me from the other. Neither terrifies. I will die. Let it be when the mind I have defined as myself has ceased to allow me to function as a sentient being, interacting with others in a creative and independent way.

I'll make a bargain with you: I will, by this declaration, release you from your doubts about what to do, and you, in turn, will allow me to escape from a future threatened by senseless animation. Let this be our final act as colleagues.

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*Have you written your own declarations of intent and have you notified your own physician or family about them? We challenge you, the readers of THE WESTERN JOURNAL OF MEDICINE, to send us your comments. A public declaration will reveal varieties of opinion. It will put in writing your easy-to-say claims; it will give you an idea of the challenges involved in constructing these directives. This should be interesting!*

THE EDITORS

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